SUBTITLE 10A. COMPLAINT PROCESS FOR ADVERSE DECISIONS OR GRIEVANCES. 15–10A–01.

- (A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.
- (B) (1) "ADVERSE DECISION" MEANS A DETERMINATION BY A PRIVATE REVIEW ACENT, A CARRIER OR A HEALTH CARE PROVIDER ACTING ON BEHALF OF A CARRIER THAT A PROPOSED OR DELIVERED HEALTH CARE SERVICE:
- $\stackrel{\text{(I)}}{\leftarrow}$ IS OR WAS NOT MEDICALLY NECESSARY, APPROPRIATE, OR EFFICIENT; OR
- $_{\rm (H)}$ $\,$ MAY RESULT IN NONCOVERAGE OF THE HEALTH CARE SERVICE.
- (B) (1) "ADVERSE DECISION" MEANS A UTILIZATION REVIEW DETERMINATION BY A PRIVATE REVIEW AGENT, A CARRIER OR A HEALTH CARE PROVIDER ACTING ON BEHALF OF A CARRIER THAT:
- (I) A PROPOSED OR DELIVERED HEALTH CARE SERVICE COVERED UNDER THE MEMBER'S CONTRACT IS OR WAS NOT MEDICALLY NECESSARY, APPROPRIATE, OR EFFICIENT; AND
- (2) "ADVERSE DECISION" DOES NOT INCLUDE A DECISION CONCERNING A SUBSCRIBER'S STATUS AS A MEMBER
 - (C) "CARRIER" MEANS:
- (1) AN INSURER <u>THAT OFFERS HEALTH INSURANCE OTHER THAN LONG</u> <u>TERM CARE INSURANCE OR DISABILITY INSURANCE</u>;
 - (2) A NONPROFIT HEALTH SERVICE PLAN:
 - (3) A HEALTH MAINTENANCE ORGANIZATION:
 - (4) A DENTAL PLAN ORGANIZATION; OR
- (5) ANY OTHER PERSON THAT PROVIDES HEALTH BENEFIT PLANS SUBJECT TO REGULATION BY THE STATE.
- (D) "COMPLAINT" MEANS A PROTEST FILED WITH THE COMMISSIONER INVOLVING AN ADVERSE DECISION OR GRIEVANCE DECISION CONCERNING THE MEMBER
- (E) "GRIEVANCE" MEANS A PROTEST FILED BY A MEMBER OR A HEALTH CARE PROVIDER ON BEHALF OF A MEMBER WITH A CARRIER THROUGH THE CARRIER'S INTERNAL GRIEVANCE PROCESS REGARDING AN ADVERSE DECISION CONCERNING THE MEMBER.
 - (E) (F) "GRIEVANCE DECISION" MEANS A FINAL DETERMINATION BY A